

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Rely on Your Beliefs Fund

Mailing Address 209 Pennsylvania Avenue Southeast

City Washington State DC Zip Code 20003

Purpose of Disbursement
2007 Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2007 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: 2007 Contribution

Transaction ID: 31129-4924280047416

Date of Disbursement

06 / 27 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Richard Burr Committee

Mailing Address Post Office Box 5928

City Winston-Salem State NC Zip Code 27113

Purpose of Disbursement
Uncashed 9/21/05 Contribution

Candidate Name
Richard Burr

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District:

Transaction ID: 85446-36219424009323

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

-500.00

Full Name (Last, First, Middle Initial)

C. Rogers for Congress

Mailing Address PO Box 581
Post Office Box 581

City Brighton State MI Zip Code 48116

Purpose of Disbursement
2008 Primary

Candidate Name
Mike Rogers

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 08

Transaction ID: 5186120702235354248

Date of Disbursement

02 / 23 / 2007

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)